CONTACT, PERMIT, AND SYSTEM CHARACTERIZATION INFORMATION

CONTACT INFORMATION

FACILITY NAME	FACILITY ADDRESS	NPDES PERMIT NO.
CONTACT NAME	CONTACT TITLE	DATE PERMIT ISSUED
PHONE NUMBER	FAX NUMBER	DATE OF EXPIRATION

PERMIT INFORMATION

	YES	NO	N/A	Source *
What facilities does the permit cover? WWTP and wastewater collection system				
Does the permit authorize wet weather bypasses?				
What is the average design flow rate for the treatment plant? _____ MGD				
What is the peak design flow rate for the treatment plant? _____ MGD				
Is the facility under any administrative or judicial order?				

SYSTEM CHARACTERIZATION

Are partially treated effluents combined with fully treated flows prior to discharge? (Blend)				
Length of pipeline in the collection system (all non-lateral lines): _____ miles				
Number of pump stations in the system: (list in Attachment A) _____				
Number of constructed overflows prior to the WWTP: (list in Attachment B) _____				
Are portions of the interceptors or other lines known or believed to be hydraulically overloaded or undersized?				
Are there locations known to experience basement flooding or other similar problems?				
What information is available on maps kept on-site by the permittee: all major interceptors and trunk sewers with pipe size and direction of flow				
laterals				
pump stations				
diversion chambers				

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

	YES	NO	N/A	Source *
flow meters				
rain gauge stations				
control structures (regulators, diversion structures, weirs, valves)				
water quality monitoring sites				
receiving streams				
locations of telemetering devices				
treatment plant location				

How many municipalities discharge to the collection system? _____

What treatment capacity is available at the WWTP?

design primary treatment capacity _____ MGD
design secondary treatment capacity _____ MGD
peak flow primary treatment capacity _____ MGD
peak flow secondary treatment capacity _____ MGD

What is the annual average flow for each of the previous four (4) calendar years?

What is the population served by the WWTP and their respective sanitary sewer systems?

Which parts of the collection system are owned by the permittee?

all				
pump stations				
diversion chambers				
sewer pipes (other than private laterals)				

Which parts of the collection system are operated by the permittee?

all				
pump stations				
diversion chambers				
sewer pipes (other than private laterals)				

Does the permittee have legal agreements with other parties that required those parties to perform tasks required by the NPDES permit?

I. PROPER OPERATION AND MAINTENANCE

A. General

Does the permittee have an O&M plan for the wastewater collection system?

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

	YES	NO	N/A	Source *
If so, is that plan approved or required by the permitting authority?				
Does the permittee have a copy of the documentation required under the O&M plan?				
Does the permittee have a process for periodically revising the O&M plan?				
Does the O&M plan specify that some activities be performed by a separate legal entity?				
If so, does the permittee have documentation that those activities are being performed?				

B. Inspections

	YES	NO	N/A	Source *
Does the permittee inspect known SSO locations?				

How frequently are the known SSOs inspected? (e.g., each rain event, complaint, rain over .5 inch) _____

How frequently are pump stations inspected? _____

	YES	NO	N/A	Source *
Does the permittee have documentation of SSO inspections?				
Does the permittee have documentation of the pump station inspections?				
Does the permittee have records of collapsed and/or blocked sewers?				
Does the permittee conduct CCTV inspections of the collection System?				

If so, how many miles of sewer lines are inspected with CCTV annually? _____ Miles

How many equivalent full time staff are dedicated to inspections? _____

If not, how are collection system equipment malfunctions or other deficiencies identified?

	YES	NO	N/A	Source *
Will the CCTV inspections eventually reach all major (i.e. non-lateral) lines in the system?				

C. Cleaning and Maintenance

	YES	NO	N/A	Source *
Does the permittee have a schedule for cleaning the sewer lines?				

How are cleaning frequencies for the sewer lines determined?

	YES	NO	N/A	Source *
Does the permittee have procedures for reducing solids deposition in the system?				
Does the permittee document sewer cleaning that has been performed?				
If so, does the documentation in any way differ from the permittee's schedule for				

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	YES	NO	N/A	Source *
cleaning?				
Does the permittee exercise regulators according to a schedule?				
Are any regulators not functioning (e.g. rusted in place)?				

What is the procedure for documenting and correcting collection system deficiencies?

How many complaints (re: basement backups, other discharges)) are received annually? _____

How are complaints addressed?

Is a computerized maintenance program used to track work orders? If so, is it used for:				
the WWTP?				
the pump stations				
the collection system, apart from the pump stations?				
Does the permittee have the following records?				
cleaning logs				
citizen complaints				
work orders				
video tape of CCTV inspections				
maps of problem areas				
emergency response plan				
training manuals				
Does the permittee have a grease control program?				
Does the permittee have a root control program?				
Do the maintenance records indicate recurring problems which the program does not seem to be effective in reducing?				

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	YES	NO	N/A	Source*

If so, describe:

How many full time equivalent staff are dedicated to sewer cleaning and maintenance? _____

What spare parts for pump stations are kept in the inventory?

D. Operation of the Collection System

How many pump stations have a backup power supply? How many of these have: _____

- dual feed? _____
- on-site generator? _____
- off-site portable generator _____

How many pump stations have backup pumping capacity if the largest pump goes down? _____

How many times has a pump failure (or inadequate pumping capacity) resulted in a SSO? _____

How many pump stations have permanent flow meters? _____

How many pump stations are monitored remotely? _____

What is the annual operating budget for the collection system? $_____

How many miles are operated within the budget? _____ miles

What type of training does the permittee provide to collection system personnel?

Does the permittee have procedures for regulating diversion and bypass valves? | | | | |

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

	YES	NO	N/A	Source*
If so, describe:				

What flow rate can the WWTP receive before additional flow adversely affects the WWTP treatment process _____ MGD

	YES	NO	N/A	Source*
Does the permittee do a pre-storm drawdown of the WWTP wet well and interceptors to add additional wet weather capacity?				
Which, if any, of the following does the permittee use for storage of untreated sewage?				
abandoned pipelines				
catch basin storage tanks				
earthen basins				
first flush tanks				
in-receiving water flow balance				
in-sewer storage (e.g. raising weirs, regulator adjustment)				
lagoons				
open concrete retention tanks				
closed concrete retention tanks				
storage tunnels and conduits				
Which, if any, of the following does the permittee use to reduce storm water inflow:				
area drain, foundation drains, and roof leader disconnection				
basement sump pump redirection				
flow restrictions and catch basin inlet modification				
grassed swales and infiltration trenches				
infiltration basins				
on-street surface storage				
porous pavements				
storm water detention basins				
storm water infiltration sumps				
Does the permittee have programs for reducing I/I ?				
Does the permittee have a pretreatment program?				

What percentage of flow to the POTW is non-domestic? _____ %

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

	YES	NO	N/A	Source *
Has the permittee identified industrial users whose discharge could reach SSOs?				
If so, does the permittee have documentation of this evaluation?				
Has the permittee modified its pretreatment program to reduce IU discharge to SSOs?				
If so, do the modifications				
prohibit batch discharges during wet weather?				
require detention of industrial discharge during wet weather?				

other:

Does the permittee have a process for periodic review of the pretreatment program?				

Is the maximum wet-weather WWTP capacity reached during wet weather events?				
If a bypass is used, does the permittee monitor bypass flow rates?				
Are other treatment units available for use during a storm event?				
Has the permittee determined the hydraulic capacity of each pump station?				
Has the permittee determined the hydraulic capacity of each influent sewer?				
Is pump station capacity smaller than interceptor capacity in any portions of the system?				

What other bottlenecks, if any, has the permittee identified in the collection system?

Has the permittee upgraded any pump stations to increase capacity?				

Has the permittee identified any process limitations at the WWTP? If so, what are they?

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	YES	NO	N/A	Source *
How does the permittee become aware of SSOs?				
What are the most common causes of SSOs?				
What steps has the permittee taken to prevent SSOs at problem locations?				
Does the permittee document SSOs? (list in Attachments C, D and E)				
Does the documentation include:				
date and time of overflow				
volume of overflow				
SSO Location				
cause of overflow				
corrective action taken				
ultimate destination of overflow				
Does the permittee's documentation reports SSOs to the permitting authority?				

Which, if any, of the following methods does the permittee use to monitor the frequency and duration of SSO discharges?

installed sensors and telemetry				
visual survey during scheduled inspections				
visual survey during wet weather				
citizen complaints				

Which, if any, of the following methods does the permittee use to measure the impacts of SSOs on receiving streams?

visual survey of receiving stream when SSOs are active				
biosurveys				

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	YES	NO	N/A	Source *
water quality sampling:				
BOD/CBOD				
total suspended solids				
dissolved oxygen				
fecal coliform				
E. coli				
enterrococci				

Does the permitte have a formal written plan for responding to, addressing, and reporting SSOs? If yes, please provide a copy of the plan.

ATTACHMENTS – attach the following information. If available, please provide the above information in a Microsoft compatible spreadsheet format.

Attachment A - List of Pump Stations			
Attachment B - List of Constructed Overflows			

Attachment C - List of SSOs that Reached Waters of the Sate (past 4 years)

Attachment D - List of SSOs that Didn't Reach Waters of the Sate (past 4 years)

Attachment E - List of SSOs that Reached Private Buildings (past 4 years)

Date Survey Completed: _____

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ATTACHMENT A
LIST OF LIFT STATIONS

L/S #	LIFT STATION NAME	FLOW (gpm)	BACK UP POWER?	BACK UP POWER MATCHES LOAD?	GEN KW

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

ATTACHMENT B
LIST OF CONSTRUCTED OVERFLOWS

NO.	NAME	LOCATION

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

ATTACHMENT C
SSO REACHED WATERS

DATE SSO	TIME NOTIFIED	TIME RESPONDED	TIME CEASED	TIME CORRECTIVE ACTION COMPLETED	SSO LOCATION	WATERWAY IMPACTED (BY NAME); STORM DRAIN LEADING TO WATERWAY (BY NAME)	SSO VOLUME (GALLONS)	CAUSE	CORRECTIVE ACTION	PREVENTIVE ACTION

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

ATTACHMENT D
SSO DID NOT REACH WATERS

DATE SSO	**TIME NOTIFIED**	**TIME RESPONDED**	**TIME CEASED**	**TIME CORRECTIVE ACTION COMPLETED**	**SSO LOCATION**	**WATERWAY IMPACTED (BY NAME); STORM DRAIN LEADING TO WATERWAY (BY NAME)**	**SSO VOLUME (GALLONS)**	**CAUSE**	**CORRECTIVE ACTION**	**PREVENTIVE ACTION**

[*] (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other

ATTACHMENT E
SSO PRIVATE BUILDINGS

DATE SSO	TIME NOTIFIED	TIME RESPONDED	TIME CEASED	TIME CORRECTIVE ACTION COMPLETED	SSO LOCATION	WATERWAY IMPACTED (BY NAME); STORM DRAIN LEADING TO WATERWAY (BY NAME)	SSO VOLUME (GALLONS)	CAUSE	CORRECTIVE ACTION	PREVENTIVE ACTION

* (P) Permit; (A) Application for permit; (R) Reports submitted; (I) Interview of facility representative; (D) Direct observation; (O) Other